

RETURN TO: Missouri Department of Transportation
Operations
P.O. Box 270 (Physical Address: 2211 St. Mary's Blvd.)
Jefferson City, MO 65102

Contractor Vendor No. _____
To Be Assigned by MoDOT
Revision Date: 06/14/2002

Missouri Highway and Transportation Commission
PREQUALIFICATION CONTRACTOR QUESTIONNAIRE

| | | |
|-------|-------|---------------------------------|
| _____ | _____ | An Individual |
| _____ | _____ | A Partnership |
| _____ | _____ | A Corporation |
| _____ | _____ | A Joint Venture |
| _____ | _____ | A Limited Liability Corp. |
| _____ | _____ | A Limited Liability Partnership |

Legal Name of the Corporation, Firm or Individual Contractor

Fictitious Name under which you wish to bid (if Registered with the Missouri Secretary of State)

P.O Box _____ City & State _____ Zip Code _____

Street Address _____

(If different from P.O. Box:) City & State _____ Zip Code _____

Telephone No. _____ Date Submitted _____

Fax No. _____ E-Mail Address _____

Contact person: _____

Has this firm or organization (or in the case of a partnership or joint venture, has any contractor which is included within this firm or organization) performed any work as a contractor or subcontractor for the Missouri Highway and Transportation Commission, the Missouri Highway and Transportation Department, or the Missouri Department of Transportation, in the last five (5) years? ____ Yes ____ No

If yes, give complete details, descriptions and dates on additional sheets as needed.

This firm or organization has _____ years experience as a general contractor and/or _____ years as a subcontractor in the heavy and highway construction field.

Has your firm or organization ever failed to complete any work awarded to you? ____ Yes ____ No
If so, where and why? (Attach additional sheets as needed.) _____

Has your firm or organization ever failed to complete any work in a timely manner? ____ Yes ____ No
If so, where and why? (Attach additional sheets as needed.) _____

Type(s) of work on which your firm or organization desires to be prequalified:

_____ Earthwork _____ Bituminous Pavement _____ Portland Cement Concrete Pavement

_____ Bridges, Culverts, and other Similar Structures _____ All other (Explain): _____

This organization has completed the following similar projects for the type(s) of work designated within the last five years. (Attach additional sheets as needed.)

| Contract Amount | Type of Work | When Completed | Location City and State | Project Owner's Name and Address |
|------------------------|---------------------|-----------------------|--------------------------------|---|
| | | | | |

Listed below are the organization's current projects in progress, including the value of projects not yet completed and their completion dates. (Attach additional sheets as needed.)

| Contract Amount | Type of Work | Estimated Completion Date | Percent Complete | Location City and State | Project Owner's Name and Address |
|------------------------|---------------------|----------------------------------|-------------------------|--------------------------------|---|
| | | | | | |

Listed below are the organization's construction experience of personnel performing the type(s) of work designated. (Attach additional sheets as needed.)

| Name | Present Position | Years of Construction Experience | Magnitude and Type of Work | In What Capacity |
|-------------|-------------------------|---|-----------------------------------|-------------------------|
| | | | | |

Listed below is the organization's equipment available for the type(s) of work designated. (Attach additional sheets as needed.)

| Number of Units | Description | Specify: Leased, Owned or Available for Lease |
|-----------------|-------------|--|
| | | |

Listed below are all the officers, owners and/or directors of this organization, **with more than 5% ownership**, their present position, and their construction experience. (Attach additional sheets as needed.)

| Name | Present Position | % of Owner-ship | Years of Const. Exp. | Magnitude And Type of Work | In What Capacity |
|------|------------------|-----------------|----------------------|----------------------------|------------------|
| | | | | | |

Do any of the people listed above:

- (a) Perform a management or supervisory function for any other business?

_____ Yes _____ No (If yes, list below.)

Name

Title

Business Name & Function

- (b) Work for or other firms that have a business relationship with your firm?

_____ Yes _____ No (If yes, list below.)

Name

Title

Business Name & Function

Listed below is a **Missouri** resident designated by this organization as its agent for the receipt of legal process.

Complete Name, Street and Mailing Address, and Telephone Number

Please read the following paragraphs and attach the listed documents to the completed questionnaire.

Attach current insurance coverage, including comprehensive general liability, worker’s compensation and automobile/vehicular coverage. If this coverage does not meet all requirements of a contractor under Sec. 107 of the Missouri Standard Specifications for Highway Construction, then both the contractor organization and its insurance company or broker shall submit notarized statements that the contractor is able to and shall obtain the required types and amounts of insurance, with the required endorsements, prior to commencing work if the contractor is awarded a Missouri state highway project contract.

If the organization’s Bonding Company is not listed in the current “United States Department of the Treasury, Fiscal Service, Department Circular 570, Companies Holding Certificates of Authority as Acceptable Sureties on Federal Bonds and as Acceptable Reinsuring Companies”, **attach the most recent complete audit** of that Bonding Company. If the bonding company is so listed, **at a minimum attach the complete balance sheets from the last audit of that bonding company.**

Attach a signed and notarized writing from the organization’s surety bonding company or broker, stating the type(s) of highway projects for which that company or broker will issue a performance and payment bond in an amount in excess of two million dollars (\$2,000,000) to cover the highway project work and debts of the organization.

If a corporation, **attach a copy of the organization’s current annual registration report**, or initial report if a new corporation, on file with the Corporation Division of the Missouri Secretary of State’s Office. Each corporation which is a party to a joint venture shall submit the same required report with its joint venture contractor questionnaire. See Sec 102 of the Missouri Standard Specifications for Highway Construction. **If applicable, provide a certified copy of the fictitious name registration** that you have on file with the Missouri Secretary of State’s Office.

* * * * *

If this firm or any of the listed individuals is now or has been debarred, suspended or restricted from bidding by any state or federal agency or official, check here _____ and attach details on additional sheets as needed.

* * * * *

This firm will comply with all written requests by the Missouri Department of Labor and Industrial Relations, Division of Labor Standards, to provide information for the purpose of establishing a prevailing wage.

Signature(s) _____

(If partnership — all partners must sign)

Affidavit

_____, being duly sworn stated that (*circle one*) she or he is _____
(Typed or printed Officer's name) (Title of Officer)

of _____, that (*circle one*) she or he has read and understands the
(Name of Firm)
requirements of Section 227.105, RSMo Supp. 1996, and Rule 7 CSR 10-15-010, "Prequalification to Bid of Certain Contractors",
that (s)he is authorized to execute this document on behalf of this firm, and that all statements on this form and attachments thereto
are true, correct and complete.

Signature of the Officer

Subscribed and sworn to before me by _____,
who personally appeared before me and is known to me to be the person described in and who executed the foregoing affidavit, and
acknowledged that (*circle one*) she or he executed the same as (*circle one*) her or his free act and deed.

IN WITNESS WHEREOF I have hereto set my hand and affixed my official seal at my office in _____
_____, this _____ day of _____, 20 _____.

Notary Public Signature

Typed or Printed Name of Notary Public

**Seal of
Notary Public**

My commission expires _____, 20 _____.